

# U.S. Department of Veterans Affairs' (VA) Calendar Year (CY) 2023 Veteran Homelessness National Goals Office Hours

VHA Homeless Programs Office  
September 7, 2023

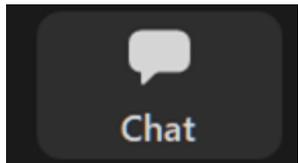
# Housekeeping

- This call will be recorded.
- The webinar will last approximately 60 minutes.
- All attendees will be muted.
- Questions can be submitted using the Chat function.
- If you have questions following the call, please email [VHA11HPO38kGoalSupport@va.gov](mailto:VHA11HPO38kGoalSupport@va.gov).

# Zoom Controls

Typically, on the bottom of the screen

**All participants are muted upon entry**



Chat – add questions or comments during the call.

# Agenda

- Progress Update
- Leadership Remarks
- One Team Case Conferencing on Returns Guidance
- Housing Location and Stability Scenarios Part 2
- Q&A



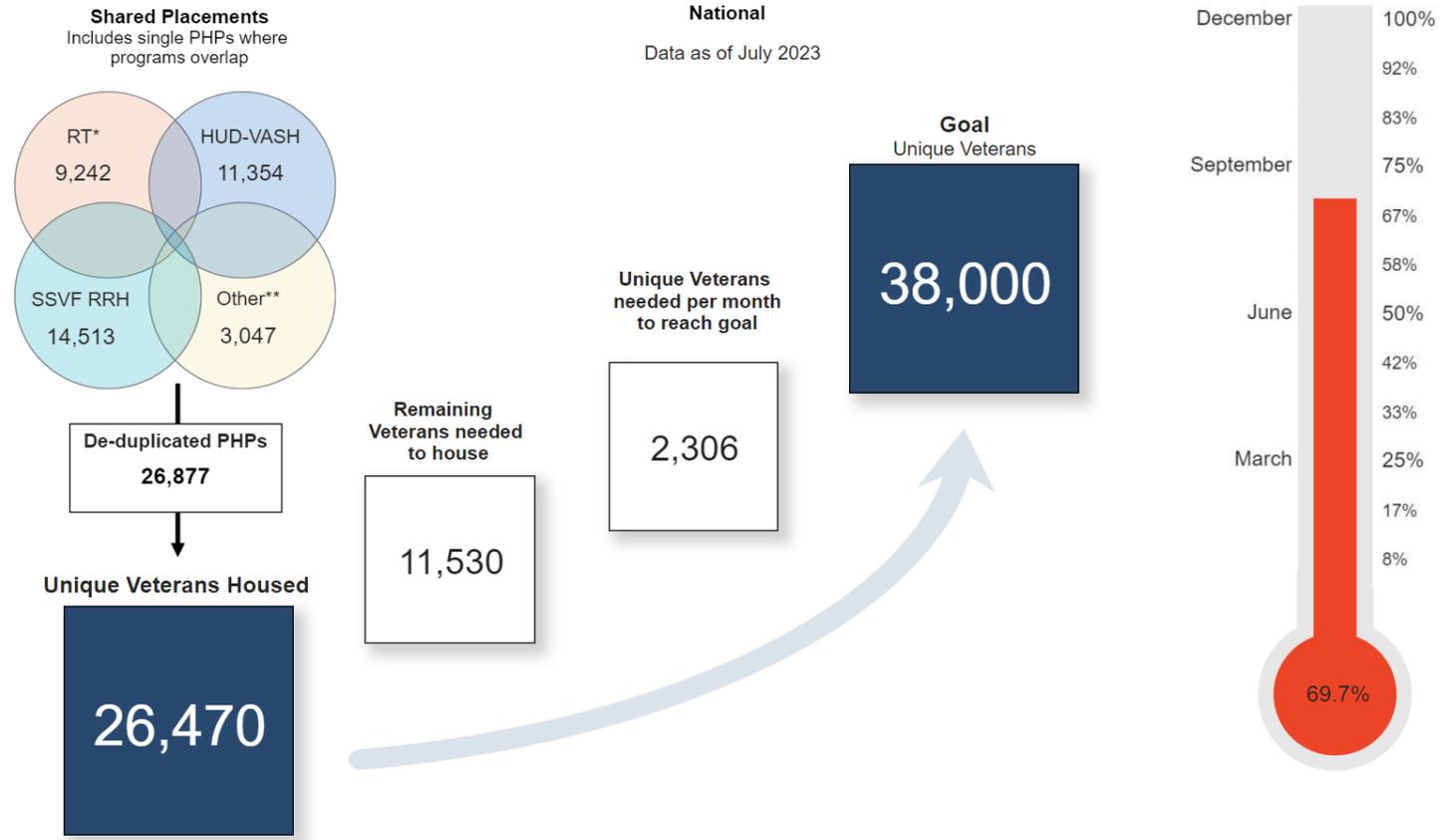
# Progress Update



# Goal 1: Permanent Housing

## Goal 1: Permanent Housing

**Permanent Housing:** VA has made a commitment to permanently house (PH) at least 38,000 unique Veterans in CY 2023. De-duplicated permanent housing placements (PHPs) for unique Veterans made during CY 2023 from the following programs count toward this goal: Grant and Per Diem (GPD), Health Care for Homeless Veterans (HCHV) Contracted Residential Services (CRS), HCHV Low Demand Safe Haven (LDSH), Housing and Urban Development-VA Supportive Housing (HUD-VASH), and Supportive Services for Veteran Families (SSVF) – Rapid Re-Housing (RRH) homeless services who obtain permanent housing (PH), Mental Health Residential Rehabilitation Treatment (MHR RTP), HCHV Case Management (CM), and for Veterans homeless at entry for the following programs: GPD CM, SSVF – Homelessness Prevention (HP), Veterans Justice Outreach (VJO), and Health Care for Reentry Veterans (HCRV).



\* RT Programs: GPD and HCHV CRS/LDSH  
 \*\* Other: MH RRTP, GPD CM, HCHV CM, Homeless VJP, and SSVF HP  
 \*\*\* Nationally, Unique Veterans Housed represents all unique Veterans across facilities

Veteran Detail

# Goal 2: Prevention of Returns to Homelessness

## Goal 2: Prevention of Returns to Homelessness

**Prevention of Returns to Homelessness:** For Veterans who become permanently housed in CY 2023, no more than 5% return to homelessness. Of those who return to homelessness in CY 2023, no less than 90% will be re-housed or placed on a pathway to re-housing in CY 2023.



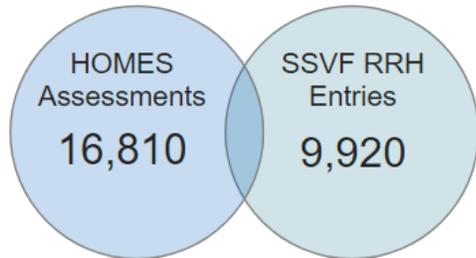
# Goal 3: Engagement with Unsheltered Veterans

## Goal 3: Engagement with Unsheltered Veterans

**Engagement with Unsheltered Veterans:** Nationally, VA will increase outreach to and engage with no less than 28,000 unique unsheltered Veterans

**National**  
Data as of July 2023

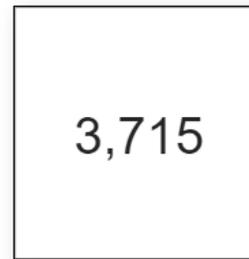
**Unsheltered Veteran Engagement**  
Unsheltered Veterans de-duplicated by type of engagement (includes Veterans unsheltered at both assessment and SSVF RRH program entry)



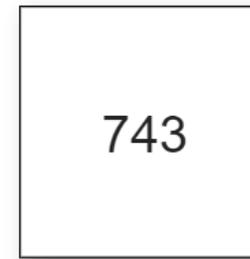
**Unique Unsheltered Veteran Engagement**



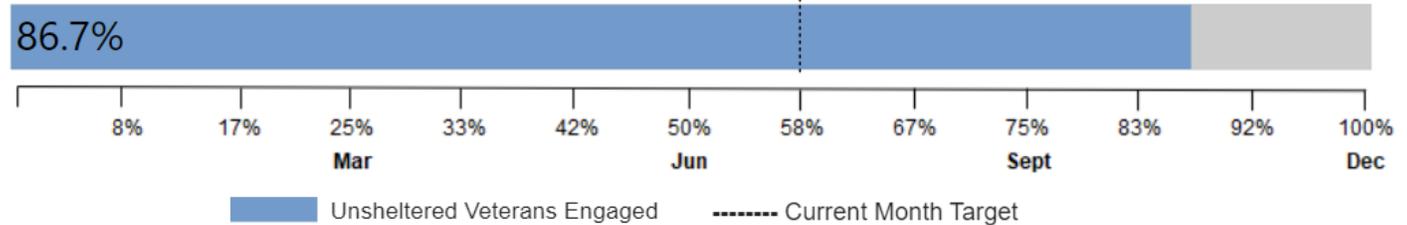
**Remaining Unsheltered Veterans Needed**



**Unsheltered Veterans needed per month to reach goal**



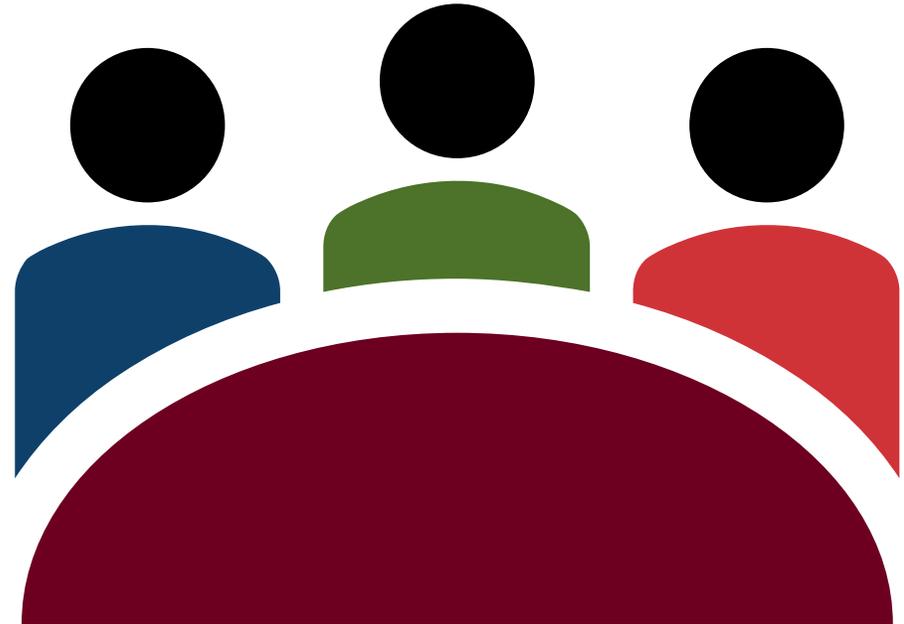
**Goal Unique Veterans**



# Leadership Remarks



# One Team Case Conferencing on Returns Guidance



# Refresher: How VA Tracks Permanent Housing Placements

- Following the same methodology as the CY 2022 goal, credit for Veterans housed for permanent housing placements (PHP) made from the following programs will count toward this goal:
  - All Grant and Per Diem (GPD) grant models (not including GPD Case Management)
  - Health Care for Homeless Veterans (HCHV) Contracted Residential Services (CRS)
  - HCHV Low Demand Safe Haven (LDSH)
  - HCHV Case Management (CM)
  - Housing and Urban Development-VA Supportive Housing (HUD-VASH)
  - Supportive Services for Veteran Families (SSVF) Rapid Rehousing (RRH)
  - Mental Health Residential Rehabilitation Treatment (MHRRTTP) Domiciliary Care for Homeless Veterans (DCHV) and Compensated Work Therapy-Transitional Residence (CWT-TR) bed types
  - GPD CM (for those Veterans who were homeless at entry)
  - SSVF Homeless Prevention (HP) (for those Veterans who were homeless at entry)
  - Veterans Justice Outreach (VJO) (for those Veterans who were homeless at assessment)
  - Health Care for Reentry Veterans (HCRV) (for those Veterans who were homeless at assessment)
  - MHRRTTP Substance Use Disorder (SUD), Post Traumatic Stress Disorder (PTSD), and General bed types (for those Veterans who were homeless at screening)

# Refresher: What is Permanent Housing?

- Permanent housing (PH) includes the following destinations:
  - Housing owned by Veteran, no ongoing housing subsidy
  - Housing owned by Veteran, with ongoing housing subsidy
  - Housing rented by Veteran, no ongoing housing subsidy
  - Housing rented by Veteran with HUD-VASH voucher
  - Housing rented by Veteran with a non-HUD-VASH housing subsidy
  - Permanent housing for formerly homeless persons (such as a Continuum of Care project or Shelter+Care)
  - Staying or living with family, permanent tenure
  - Staying or living with friends, permanent tenure
  - Rental by the client, with GPD Transition-in-Place housing subsidy
  - Moved from one Housing Opportunities for Persons With AIDS (HOPWA)-funded project to HOPWA PH
  - Rental by the client, with RRH or equivalent subsidy
  - Host Home (non-crisis)
  - Rental by the client, with Housing Choice Voucher (tenant or project-based)
  - Rental by the client in a public housing unit

# Refresher: How VA Tracks Returns to Homelessness

- **Returns** are defined by re-engagement in VA homeless programs.
  - **Re-engagement** is identified by a housing status of “literally homeless” at the time of assessment (for HUD-VASH, GPD, HCHV CRS/LDSH, HCHV CM, HCRV, and VJO) or at SSVF program entry where the Veteran’s living situation at entry was sheltered or unsheltered homeless.
  - To account for date variances in service coordination, assessments and SSVF entries occurring within a 30-day window of the permanent housing placement date will not be considered returns.

# Refresher: How VA Tracks Rehousing or Pathways to Rehousing

- Of those returning to homelessness during CY 2023, at least 90% will be rehoused or on a pathway to PH, evidenced by either:
  - A **return to permanent housing** (rehoused) defined as any exit to a permanent destination from HUD-VASH, HCHV CRS/LDSH, HCHV CM, GPD (not including GPD CM), HCRV or VJO after the return date, or an SSVF or HUD-VASH move-in date after the return date.
  - A **pathway** defined as current service enrollment or entry into a VA homeless program that provides direct housing support. These programs include HUD-VASH, GPD (not including GPD CM), HCHV CRS/LDSH, HCHV CM, SSVF, VJO, HCRV, DCHV, and CWT-TR. Veterans are considered currently enrolled if a valid entry date is documented, and no exit date is documented.
- **Note:** Effective September 2023, Veterans enrolled in VJO, HCRV, DCHV, and CWT-TR will also be considered on a pathway to permanent housing.

# One Team Case Conferencing on Returns Overview

- The One Team Case Conferencing on Returns is for all relevant staff and programs to engage in **deliberate, coordinated, Veteran-level case conferencing** to ensure all Veterans who have returned to homelessness are rapidly reconnected to VA services and housing pathways.
- For this specific effort, Case Conferencing is defined as an **inclusive, community process** with VA and non-VA service providers working to drive re-engagement efforts related to Veterans who have returned to homelessness.
- These meetings are **barrier-busting and problem-solving** endeavors to engage Veterans who have returned to homelessness in 2023 and are not yet rehoused or on a pathway to permanent.
- They are led by regional Network Homeless Coordinators with support from national subject matter experts from VA's Homeless Programs Office.

# Privacy and Information Sharing Guidance: Routine Use #30

- Routine Use #30 states that VA may disclose relevant health care and demographic information to health and welfare agencies, housing resources, and community providers, consistent with good medical-ethical practices, for Veterans assessed by or engaged in VA Homeless Programs for purposes of:
  - Coordinating care;
  - Expediting access to housing;
  - Providing medical and related services;
  - Participating in coordinated entry processes;
  - Reducing Veteran homelessness;
  - Identifying homeless individuals in need of immediate assistance; and
  - Ensuring program accountability by assigning and tracking responsibility for urgently required care.
- This routine use provides legal authority for VHA Homeless Program staff to disclose pertinent Veteran information, excluding 38 U.S.C. 7332-protected information, without a formal data sharing agreement or prior signed, written authorization from the Veteran if the requirements of the legal authority are followed.
- [Read our Quick Guide on Routine Use #30.](#)

# The CY23 PHP Detail Report

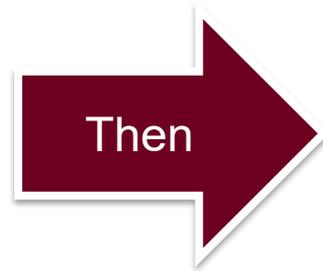
The [CY PHP Detail Report](#) displays the Veterans included in the final return counts. The report also provides insight into the return to homelessness, including the date of the initial return, whether the Veteran had a new instance of re-housing if the Veteran was placed on a pathway to rehousing, and if the Veteran is currently included on the HOMES census or actively enrolled in SSVF.

CY23 PHP Detail																			
Facility Selected: All CY 2023 PHP Data Includes: January through July Veterans with a PHP in CY2023 and related Return to Homelessness information  Total Records: 792 Unique Veterans: 772 * Housing placement order when there is more than one placement per Veteran.																			
VAMC	SSN	Veteran Name	CoC	Credit	Entry Date	Exit Date	PHP Date	Program	Program Type	Primary Project	PHA	Shared Project	Housing Episode Order *	Return to Homelessness	Return Data Source	Return Date	Return and Re-housed	Return and placed on a Pathway to Re-housing	Active on Census
					8/17/2022	1/1/2023	1/1/2023	SSVF RRH	SSVF_RRH	18-ZZ-034			1	Yes	SSVF Entry	7/27/2023	No	Yes	No
					11/17/2022	1/1/2023	1/1/2023	SSVF RRH	SSVF_RRH	17-NE-052			1	Yes	HOMES Assessment	6/16/2023	No	No	No
					8/19/2022	1/1/2023	1/1/2023	RT	HCHV	16-013-CS			1	Yes	HOMES Assessment	4/14/2023	No	Yes	Yes
					11/17/2022	1/1/2023	1/1/2023	RT	HCHV	21-006-CS			1	Yes	HOMES Assessment	2/6/2023	Yes	No	Yes
					10/14/2022	1/1/2023	1/1/2023	SSVF RRH	SSVF_RRH	14-MD-214			1	Yes	SSVF Entry	3/28/2023	Yes	No	Yes
					9/1/2022	1/1/2023	1/1/2023	HUD-VASH	VASH				1	Yes	SSVF Entry	6/9/2023	Yes	No	No
					11/15/2022	1/1/2023	1/1/2023	RT	GPD	VOAO121-1392-539-PD-21		19-ZZ-263	1	Yes	HOMES Assessment	5/30/2023	No	Yes	Yes
					9/27/2022	1/1/2023	1/1/2023	SSVF RRH	SSVF_RRH	23-CA-437			1	Yes	SSVF Entry	5/8/2023	No	Yes	Yes
					7/7/2022	1/1/2023	1/1/2023	RT	HCHV	09-001-HV			1	Yes	SSVF Entry	5/17/2023	Yes	No	No
					1/1/2023	1/1/2023	1/1/2023	SSVF RRH	SSVF_RRH	19-TX-290			1	Yes	HOMES Assessment	6/14/2023	No	Yes	Yes
					12/14/2022	1/1/2023	1/1/2023	RT	HCHV	16-013-CS			1	Yes	HOMES Assessment	4/23/2023	Yes	No	Yes
					12/2/2022	1/2/2023	1/2/2023	OTHER	GPD CM	HFH1409-2336-675-CM-22			1	Yes	HOMES Assessment	7/25/2023	No	Yes	Yes
					12/5/2022	1/2/2023	1/2/2023	RT	GPD	VOAA820-1464-667-PD-21			1	Yes	SSVF Entry	3/27/2023	Yes	No	Yes
					9/15/2022	1/3/2023	1/3/2023	RT	GPD	USV1752-1455-580-PD-21			1	Yes	HOMES Assessment	2/8/2023	Yes	No	No
					11/23/2022	1/3/2023	1/3/2023	RT	GPD	YWPA514-1257-595-PD-21			1	Yes	HOMES Assessment	3/31/2023	Yes	No	Yes
					1/3/2023	5/15/2023	1/3/2023	HUD-VASH	VASH		NJ010	15-PA-068	1	Yes	SSVF Entry	5/15/2023	Yes	No	Yes
					10/12/2022	1/3/2023	1/3/2023	HUD-VASH	VASH				1	Yes	HOMES Assessment	5/15/2023	No	Yes	Yes

Focus on Veterans with Two No's

# Anticipated Outcomes and Pathways – If, Then

If the Veteran's return to is actually a **data error...**

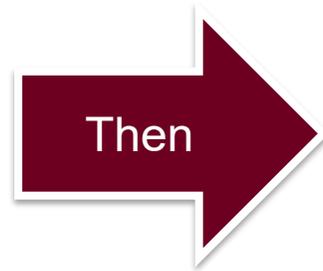


*Correct it!*

Submit a HOMES help desk ticket ASAP. If HMIS error, provide specific details for SSVF Regional Coordinator follow-up.

# Anticipated Outcomes and Pathways – If, Then

If the Veteran is now  
**housed or self  
resolved...**

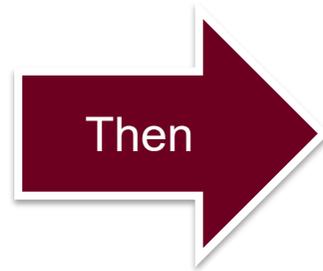


*Document it!*

Document in HOMES on the Housing and Employment Tracker (HET) report with clinical documentation to support their electronic health record.

# Anticipated Outcomes and Pathways – If, Then

If the Veteran is **not enrolled in any program...**

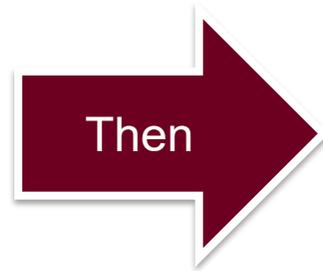


*Conference it!*

Review the Veteran's situation during the One Team Case Conferencing to determine the most appropriate program enrollment(s).

# Anticipated Outcomes and Pathways – If, Then

If Veteran is in a  
**criminal-justice  
institution...**

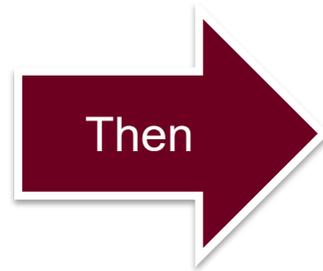


*Enroll it!*

VJO and HCRV are now considered pathways to housing. Make sure they're enrolled in the most appropriate program.

# Anticipated Outcomes and Pathways – If, Then

If Veteran is in an **institution** other than jail or prison...

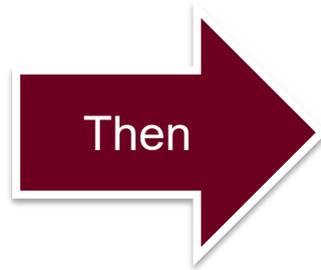


*Continue it!*

Continue to provide case management for them. The Veteran must be enrolled in a VA homeless program. Consider utilizing HCHV Case Management or SSVF.

# Anticipated Outcomes and Pathways – If, Then

If the Veteran  
**relocated** out of your  
community...



*Coordinate it!*

Work with the VA the Veteran has moved to  
coordinate their care.

# Join Your Case Conferencing Calls

- If you are VA staff frontline staff, reach out to your VA homeless program lead.
- If you're a VA homeless program lead, reach out to your Network Homeless Coordinator.
- If you are an SSVF grantee, reach out to your Regional Coordinator.
- If you're a GPD grantee, reach out to your GPD Liaison.
- If you're a Continuum of Care partner, reach out to your VA homeless program lead.
- For additional questions, email [VHA11HPO38kGoalSupport@va.gov](mailto:VHA11HPO38kGoalSupport@va.gov).

# Housing Location and Stability Scenarios Part 2



# Housing Location and Stability Scenario 1

**A Veteran exits a Residential Treatment (RT) Program (Grant and Per Diem (GPD) Program, Health Care For Homeless Veterans (HCHV) Contract Emergency Residential Services (CERS) or HCHV Low Demand Safe Haven (LDSH)) to live with friends temporarily and is shortly thereafter hospitalized:**

*A Veteran exits an RT Program and states that they plan to relocate to a different state next month to live with their sister, but in the meantime, will reside with friends temporarily until they can save a month or two of their income. Since the Veteran exits RT to stay with friends temporarily, the Veteran is not permanently housed or stably housed. The RT Exit Form should reflect the housing arrangement at exit (item 3) as “Staying or living with friends, temporary tenure.” It should reflect the housing stability at exit (item 5) as “Unstably housed/at-risk of losing housing.” About a week after the RT exit, the Veteran is admitted to an inpatient psychiatric unit. Since the Veteran was residing with friends temporarily prior to the hospital admission, the Veteran is not homeless but rather unstably housed/at-risk of losing housing.*

# Housing Location and Stability Scenario 1

## Scenario 1 Continued

*A new HOMES Assessment is not needed as the Veteran exited RT less than 30 days ago; therefore, the HOMES episode is still open. The Veteran does not have sufficient resources or support networks immediately available to prevent them from becoming literally homeless, post-hospital discharge. The Veteran is referred to and enters RT post-hospital discharge. The RT Entry Form accurately documents the Veteran's housing location as a "Psychiatric hospital or other psychiatric facility" since this is where the Veteran was staying prior to RT entry. While in RT, the Veteran works on treatment plan goals to include a successful relocation to another state where their sister resides. The RT case manager helps coordinate the Veteran's transfer of care, including coordination with the receiving site's Homeless Program for a GPD Case Management referral, as the Veteran will be temporarily residing with their sister until permanent housing is obtained.*

## Housing Location and Stability Scenario 2

**A Veteran is co-enrolled in Housing and Urban Development-VA Supportive Housing (HUD-VASH) Case Management and the Supportive Services for Veteran Families (SSVF) Program. The Veteran is exiting SSVF Rapid Rehousing (RRH) now that the Veteran has received their HUD-VASH voucher:**

*A Veteran is co-enrolled in HUD-VASH Case Management and the SSVF Program, as there are not any voucher resources immediately available, but the SSVF Program has the capacity to provide housing navigation services and temporary financial assistance (TFA). The HUD-VASH Program continues to provide clinical care related to the health and behavioral health needs of the Veteran while coordinating and collaborating with the SSVF grantee through case conferencing and transition planning. The Veteran obtains permanent housing through SSVF RRH while awaiting their HUD-VASH voucher and Public Housing Authority (PHA) housing inspection.*

# Housing Location and Stability Scenario 2

## Scenario 2 Continued

*The HUD-VASH case manager updates the Housing Progress Form (HPF) to document the date housed by SSVF RRH. The SSVF Program TFA includes a security deposit and rental assistance. When the Veteran receives their HUD-VASH voucher and the unit passes inspection, the HUD-VASH case manager updates the HPF to document the voucher and housing status updates, including the date that the HUD-VASH subsidy began as the “move-in date” (item 6). The SSVF grantee documents the destination (HMIS data element ID, 3.12) in HMIS as “Rental by client with VASH housing subsidy.” The Veteran continues engagement with the HUD-VASH Program through the appropriate stage of case management, as clinically appropriate.*

# Read Our Housing Location and Stability Scenario Quick Guide

- To support accurate documentation of Veteran information pertaining to housing location and stability, we created a new Housing Location and Stability Scenario Quick Guide.
- The Guide includes fabricated scenarios and frequently asked questions (FAQs) to:
  - Assist in understanding how and when to document a Veteran’s housing location and stability
  - Assist in correcting data discrepancies.
  - Ensure the accuracy of Veteran information for improved service delivery and coordination across programs.
  - Ensure accurate resource allocation.
- [Internal VA link to the Guide on the VHA Homeless Programs Hub.](#)
- [External VA link to the Guide on va.gov/Homeless.](https://va.gov/Homeless)



U.S. Department of Veterans Affairs  
VHA: Homeless Programs Office

## Housing Location and Stability Scenario Quick Guide

### QUICK GUIDE OVERVIEW

Accurately documenting Veteran information pertaining to housing location and stability is a critical component to ensuring quality service delivery and providing insight into program outcomes. This Quick Guide includes fabricated scenarios and frequently asked questions (FAQs) to assist in understanding how and when to document a Veteran’s housing location and stability and to assist in correcting data discrepancies, ensuring accuracy of Veteran information for improved service delivery, coordination across programs, and accurate resource allocation.

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#### Program Entry

[A Veteran is in the hospital and is discharging to a Residential Treatment \(RT\) Program \(Grant and Per Diem \(GPD\) Program, Health Care for Homeless Veterans \(HCHV\) Contract Emergency Residential Services \(CERS\), or HCHV Low Demand Save Haven \(LDSH\)\).](#)

[A Veteran exits an institution, and the community provider directly admits the Veteran to a GPD RT Program.](#)

[A Veteran has a Housing and Urban Development-VA Supportive Housing \(HUD-VASH\) voucher and is in HUD-VASH housing but enters an RT Program for 90 days.](#)

[A Veteran owns their home but is facing foreclosure and is referred to and enters an RT Program \(GPD Program, HCHV CERS, or HCHV LDSH\).](#)

[A Veteran is in the Supportive Services for Veteran Families \(SSVF\) Program but is being evicted from their apartment so is referred to and enters a GPD RT Program.](#)

#### Program Exit

[A Veteran exits an RT Program \(GPD Program, HCHV CERS or HCHV LDSH\) to permanently live with family but is being evicted and re-admitted to an RT Program.](#)

[A Veteran exits an RT Program \(GPD Program, HCHV CERS or HCHV LDSH\) and is permanently housed by the SSVF Program while awaiting a HUD-VASH voucher.](#)

[Veteran exits an RT Program \(GPD Program, HCHV CERS or HCHV LDSH\) to live with friends temporarily and is shortly thereafter hospitalized.](#)

[A Veteran is exiting HCHV CERS and will be permanently housed by the SSVF Program.](#)

#### HUD-VASH Case Management and SSVF Program Co-Enrollment

[A Veteran exits an RT Program \(GPD Program, HCHV CERS or HCHV LDSH\) and is permanently housed by the SSVF Program while awaiting a HUD-VASH voucher.](#)

[A Veteran exits an institution to SSVF Emergency Housing Assistance and is referred to and enters HUD-VASH Case Management.](#)

[A Veteran who is co-enrolled in HUD-VASH Case Management and the SSVF Program is exiting SSVF Rapid Rehousing \(RRH\) now that they have received their HUD-VASH voucher.](#)

# Q&A and Next Steps



# Wrapping Up

- The recording of this call will be posted to the [VHA Homeless Programs Hub](#) in the coming days and [VA.gov/Homeless](#).
- Join our Office Hours calls on the first Thursdays of the month at 3:00 p.m. Eastern / 2:00 p.m. Central / 11:00 p.m. Mountain / 12:00 p.m. Pacific / 9:00 a.m. Hawaii.
  - **Our next call will be on Thursday, October 5, 2023.**
  - For questions, please email [VHA11HPO38kGoalSupport@va.gov](mailto:VHA11HPO38kGoalSupport@va.gov).

*“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.” – Margaret Mead*